PTC/SB/31 (02-01)
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NOTICE OF APPEAL FROM THE EXAMINER TO THE			Docket Number (Optional)		
BOARD OF PATENT APPEALS AND INTERFERENCE		ES Grande 2-1			
	by certify that this correspondence is being deposited with	In re Application of			
	nited States Postal Service with sufficient postage as first mail in an envelope addressed to "Assistant"	Grande et al.			
Commissioner for Patents, Washington D.C. 20231" on		Application Number		Filed	
WII.		10/787,380		February 26, 2004	
Signature		For Method And Apparatus For Mounting a Modem to a			
Typed or printed name		Carrier Assembly			
name		Group Art Unit		Examiner	
***************************************		2835		Hung S. Bui	
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.					
The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 540.00				\$ 540.00 Prev. Paid	
	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$				
	A check in the amount of the fee is enclosed.				
	Payment by credit card. Form PTO-2038 is attached.				
	The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.				
V	The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-0762 I have enclosed a duplicate copy of this sheet.				
	A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
I am the					
	applicant/inventor.		/Kevin M. Mason/		
	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73 is enclosed. (Form PTO/SB/96)	3(b)	Signature		
\checkmark	attorney or agent of record.		Kevin M. Mason Typed or printed name		
	attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a).		June 30, 2011		
NOTE Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					
	*Total offorms are submitted.				

Burser Haut Statement This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual date. Any comments on the amount of time you are organized to complete time form should be sent to the Chrief Information Officer. U.S. Patient and Trademant, Office, Washington, DC 2025's DO AVO 5580 PEES OF COMPLETED FORMS TO 1HIS ADDRESS SEND TO Assistant Commissioner for Penetra, Washington, DC 2025's DO AVO 5580 PEES OF COMPLETED FORMS TO 1HIS ADDRESS SEND TO Assistant Commissioner for Penetra, Washington, DC 2025's DO AVO 5580 PEES OF COMPLETED FORMS TO 1HIS ADDRESS SEND TO Assistant Onesissoner for Penetra, Washington, DC 2025's DO AVO 5580 PEES OF COMPLETED FORMS TO 1HIS ADDRESS SEND TO Assistant Onesissoner for Penetra, Washington, DC 2025's DO AVO 5580 PEES OF COMPLETED FORMS TO 1HIS ADDRESS SEND TO Assistant Onesissoner for Penetra, Washington, DC 2025's DO AVO 5580 PEES OF COMPLETED FORMS TO 1HIS ADDRESS SEND TO Assistant Ones 1400 PEES OF COMPLETED FORMS TO 1 PEED FORMS TO 1 PEE